24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48				
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼				
DCCC	C C00000935				
Check if 24-hour report 48-hour report New report Amends report	filed on				
Full Name of Payee Great American Media Date of Dissemination: 10/08/16	Date of Public Distribution/Dissemination				
Mailing Address 3050 K Street, NW	10 08 2016 Amount				
Suite 100 City State Zip Code	3685.50				
Washington DC 20007 Purpose of Expenditure Category/	Transaction ID : SE-951359 Date of Disbursement or Obligation				
Nema of Fodoval Condidate	10 07 2016				
Comstock, Barbara, , , Support Oppose	Office Sought: ✗ House District: 10 President Senate State: VA				
Odioridal Todi To Dato	Disbursement For: Primary General 016 Other (specify) ▶				
Full Name of Payee Great American Media Date of Dissemination: 10/08/16	Date of Public Distribution/Dissemination 10 08 2016				
Mailing Address 3050 K Street, NW Suite 100	Amount				
City State Zip Code Washington DC 20007	21782.25 Transaction ID : SE-951360				
Purpose of Expenditure Media Buy Category/ Type 004	Date of Disbursement or Obligation 10 07 2016				
Comptack Borbara	Office Sought: House District: 10				
Calcildal Ical Io Date	President Senate State: ✓A Disbursement For: Primary General				
Per Election for Office Sought 293141.40	Other (specify)				
(a) SUBTOTAL of Itemized Independent Expenditures	25467.75				
(b) SUBTOTAL of Unitemized Independent Expenditures	·				
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Ward, Kelly, C., , [Electronically Filed] Date	10 10 / Park 2016				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LFEINDENT EXPEND	ITORLS	PAGE 2 OF 3 FOR SE OF FORM 24/48	_	
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼		
DCCC			C C00000935		
Check if 24-hour report X 48-ho	ur report New report	ort Amends repo	ort filed on		
Full Name of Payee Shorr Holding Company S	Shorr Johnson Magnussemination: 10/08/16	ıs	Date of Public Distribution/Dissemination 10 08 2016	1	
Mailing Address 100 N 20th Street	10/00/10		10 08 2016 Amount		
Suite 201	Ctata	7:- Code	240.40	1	
City Philadelphia	State PA	Zip Code 19103	619.10 Transaction ID : SE-951385 Date of Disbursement or Obligation	_	
Purpose of Expenditure Media Production		Category/ Type 004	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y]	
Name of Federal Candidate		Support	Office Sought: X House District: 10	_	
Comstock, Barbara, , ,		X Oppose	President Senate State: VA	_	
Calendar Year-To-Date Per Election for Office Sought		293141.40	Disbursement For: Primary General Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify) Other (specify)	_	
Full Name of Payee			Date of Public Distribution/Dissemination		
	orr Johnson Magnus ssemination: 10/08/16		10 08 2016]	
Mailing Address 100 N 20th Street			Amount		
Suite 201				ī	
City Philadelphia	State PA	Zip Code 19103	1238.20 Transaction ID : SE-951384 Date of Disbursement or Obligation	J	
Purpose of Expenditure Media Production		Category/ Type 004	10 / 07 / 2016]	
Name of Federal Candidate		Support	Office Sought: House District: 10	_	
Comstock, Barbara, , ,		X Oppose	President Senate State: VA	_	
Calendar Year-To-Date Per Election for Office Sought		293141.40	Disbursement For:	_	
(a) SUBTOTAL of Itemized Independe	nt Expenditures		▶ 1857.30]	
(b) SUBTOTAL of Unitemized Indepen	dent Expenditures]	
(c) TOTAL Independent Expenditures.)]	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Ward, Kelly, C., , Signature	[Electron	ically Filed] Date	e 10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	VI EXI ENE	TIONES		PAGE 3 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼	
DCCC			С	C00000935	
Check if 24-hour report 🗶 48-hour report	X New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y	
Full Name of Payee			Date of Put	olic Distribution/Dissemination	
Great American Media Date of Dissemination:	10/08/16		M M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 3050 K Street, NW			Amount		
Suite 100	01-1-	7'- 0-1-		04700.05	
City Washington	State DC	Zip Code 20007		21782.25 n ID : SE-951362	
Purpose of Expenditure Media Buy		Category/ Type 004	Date of Dis	bursement or Obligation / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate		Support	Office Sought:	House District: 00	
Trump, Donald, J., ,		X Oppose	resident	Senate State:	
Calendar Year-To-Date Per Election for Office Sought	, , ,	786413.95	Disbursement For: 2016 Other (Primary X General specify) ▶	
Full Name of Payee			Date of Pu	blic Distribution/Dissemination	
Shorr Holding Company Shorr Johns Date of Dissemination:			10	08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 100 N 20th Street			Amount		
Suite 201					
City Philadelphia	State PA	Zip Code 19103		619.10 ID: SE-951386	
Purpose of Expenditure Media Production		Category/ 004	Date of Dis	sbursement or Obligation / 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
N (5 1 10 51)		Type 504			
Name of Federal Candidate Trump, Donald, J., ,		Support	Office Sought:	House District:00	
Trump, Boriala, v., ,		X Oppose	✗ President	Senate State:	
Calendar Year-To-Date Per Election for Office Sought	, , ,	786413.95	Disbursement For 2016 Other	: Primary ✗ General	
(a) SUBTOTAL of Itemized Independent Expenditu	res		· •	22401.35	
(b) SUBTOTAL of Unitemized Independent Expend	litures		· •		
(c) TOTAL Independent Expenditures			· •	49726.40	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Ward, Kelly, C., ,	[Electro	nically Filed] Date	e 10 / 10		
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